

*Annual Report*  
of the  
**Arizona State Hospital**



Fiscal Year July 1, 1951 to June 30, 1952.





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of the  
**Arizona State Hospital**



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ARIZONA STATE HOSPITAL BOARD

O. D. MILLER.....Chairman  
SHERMAN HAZELTINE.....Vice Chairman  
JOHN C. UNDERWOOD, JR.....Member  
MALIN W. LEWIS.....Member  
DILWORTH C. BRINTON.....Member

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ADMINISTRATIVE OFFICERS

M. W. CONWAY.....Director  
HARRY M. WHITMER.....Business Manager



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To his Excellency, Howard Pyle

Governor of Arizona

Phoenix, Arizona

Dear Governor Pyle:

The Arizona State Hospital Board submits herewith the annual report of the major activities of the State Hospital for the fiscal year ended June 30, 1952.

The reports of the Hospital Director (who was installed November 1, 1951) and the Clinical Director (who was designated for this position shortly thereafter) present a very full and encouraging account of steady and sound improvement in the practices, therapies, and general morale of the staff and employees through the period of this report. We are gratified to be able to state at this writing (September 11, 1952) that these improvements, and also the management of the physical affairs of the institution, are continuing at an accelerated pace since the end of the period covered by this report. We feel that the sincere determination of our entire Board to work harmoniously for the production of sound and effective results is "paying off" for the patients and for the well-being of our State in this respect.

It will be noted that a little over \$50,000 was returned to the General Fund on June 30th, representing certain economies, where feasible. The building program authorized by the last Legislature is being pushed with all possible speed, consistent with a thorough study of modern mental hospital construction. Bids will be asked by the end of October. The Director's recommendations about additional building needs, particularly for a new administration building and for remodeling the present one as a nurses' dormitory, are being considered by the Board for possible inclusion in its appropriation requests for next year.

Respectfully submitted,

ARIZONA STATE HOSPITAL BOARD

O. D. Miller, Chairman

Sherman Hazeltine, Vice Chairman

John C. Underwood, Jr., Member

Malin W. Lewis, Member

Dilworth C. Brinton, Member







**ARIZONA STATE HOSPITAL**

*Annual Report  
Of The  
Director*

**July 1, 1951 to June 30, 1952**



## Members of the Arizona State Hospital Board

O. D. Miller, Chairman

Gentlemen:

I submit herewith my report of the Arizona State Hospital for the fiscal year ending June 30, 1952. During this period the outstanding achievement favorably affecting the welfare of this institution and its future progress was the acquisition of a sizable appropriation for the expansion of the physical plant.

Many interested groups and individuals contributed much toward this end, but I should indeed feel derelict if I failed to pay personal tribute to Senator William F. Kimball who perhaps took the lead in bringing the matter directly to the legislative groups after making a personal survey of the institution and recognizing the crying need for immediate relief. My deep appreciation also goes to His Excellency, Governor Howard Pyle and to a most efficient and sympathetic Board of Control whose steadfast determinations and direct efforts contributed so much to the success of the proposition. Without success in this extremely important endeavor, all institutional progress would have been stifled for another indefinite period for the reasons about to be pointed out.

Why such despair and so gloomy an outlook? Few citizens are probably aware of the following facts:

- (1) Arizona State Hospital at this writing is the most overcrowded State Hospital in the United States, carrying an overload of 63%; while the closest approach to this evil is found in the State of Illinois with 33% overcrowding.
- (2) We presently use 174 double-deck beds to accommodate 348 of our 1609 patients in a hospital originally built for less than 1000.
- (3) That we received about 1000 admissions last year and therefore have no chance to segregate according to classification or treatment requirements. This situation also forbids continued scientific treatment for the new admissions, and often determines the difference between recovery and an early return to society, or neglect and prolonged custodial care with its perpetual economic burden. Facilities for needed isolation are very limited, and all types of cases can be found in most any part of the institution.
- (4) That the personnel was so transient in its relations to the institution that there was a complete turnover of employees, or a number equal to the entire payroll left the service in the first ten months of this fiscal year. What can such a restive situation contribute to any organization, much less to one demanding special training and a degree of skill?
- (5) That the most desirable personnel in hospital organization are contented people; sufficiently paid, laboring under desirable



working conditions, and having a sense of security in their chosen careers. While bricks and mortar are necessary ingredients, they do not make a hospital; the quality of which never rises above the level of its director and his key appointees.

I should be abashed to point out these many evils and deficiencies in our beloved institution were it not for the fact that a way and means for obviating them is now within our grasp, thanks to a most interested administration and a thoughtful Legislature!

In the past decade there has been an average annual growth in the permanent resident population of 63, and any long-term plans for future hospital expansion must take this growth factor into consideration. At the present rate of growth in the population of the State, another state mental hospital may be required within ten years as this, the only one at present, soon would become top-heavy and outgrow the intimate personal touch of a single administrator.

Some clarification of the VOLUNTARY COMMITMENT STATUTE in its relation to State Hospital policies is apropos at this time. Citizens desirous of voluntary admission commonly fall under three groups:

(1) Alcoholics seeking a port of refuge during or following a spree. Some of these are on the verge of delirium tremens or alcoholic hallucinosis, and should receive treatment at a County Hospital or private institution. If the gates are let down for this group our costs will rapidly mount, and many true psychotics will of necessity be neglected because of a greater overcrowding (if such is possible) at this time.

(2) Those who entertain an unjust and false prejudice against the notoriety and inconvenience of Court procedure. For such as these private institutions and services are available elsewhere; generally beyond the reach of their available funds, however.

(3) Those who are mistakenly induced to apply for voluntary admission but who are not sufficiently stable to pursue treatment to its successful conclusion, and shortly after admission demand their release. In this group expensive scientific treatment is often prematurely terminated after a successful beginning because the hospital is not empowered by statute to hold them against their expressed will to leave. A charge of illegal detention would result from attempts to hold them under these circumstances regardless of the justification.

Therefore, it becomes necessary to screen applicants for this form of commitment, and time should be allowed in advance of admission for proper evaluation of the case and wise determinations under the law.



Briefly, what are some of the outstanding accomplishments of the past fiscal year?

A legislative appropriation for three new buildings was allocated and plans for the same are nearly completed. Work will start this fall which will provide a modern continued treatment building for 200, an open type ward with cheerful homelike atmosphere; another building for the care of 100 tubercular patients; and another for 400 seniles of both sexes. The use of these contemplated structures will relieve patient overcrowding and permit a fair degree of segregation according to mental types and requirements. The continued treatment section provides two large well-ventilated and lighted Occupational Therapy Departments as well as a barber shop for males and beauty salon for women.

Indiscriminate parking of cars on the premises resulted in traffic snarls. We have created a parking lot near the main gate for the 100-odd cars that bring employees to work each 8-hour shift. Garbage heretofore gathered in open vessels about the rear of each ward building is now collected in fly-proof (screened-in) depots.

A food service expert is making a survey of our culinary department, and this has resulted in sizeable economic savings.

The new building begun last fiscal year for reception of patients has finally been completed, equipped, landscaped and staffed.

Shade trees have been planted in many locations, and the premises generally have been cleared of trash, bottles, cans, dead brush, etc. Visitors are being met at the front gate, and all gates without an attendant are secured at night. Better lighting of grounds has been added. Much painting within and without buildings has been accomplished, and innumerable repairs taken care of, including the Pasteurizing plant (see Business Manager's Report), and remodeling of central kitchen.

A large recreational field, approximately 400 feet square is being prepared to permit daily outdoor exercises under supervision of approved psychiatric-trained directors. We are presently seeking such registered Recreational Directors. This type of therapy, as well as Occupational Therapy, contributes immeasurably toward satisfactory rehabilitation of mental patients.

#### MEDICAL, SCIENTIFIC, and NURSING STAFF:

This group is composed of eight doctors, three psychiatric social workers, one dentist, one registered graduate pharmacist, a clinical psychologist, a registered clinical laboratory director, one electroencephalograph technician, one x-ray technician, thirteen graduate nurses, 200 psychiatric aides or technicians, two hydrotherapists, one recreational and one occupational technician. One beauty parlor operator and one barber are also employed at this time.



Dr. Samuel Wick and Dr. Robert Schott have joined the Staff as of July 1, 1952. The former is a graduate of Rush Medical College, is a Diplomate of the American Board of Psychiatry and Neurology, has been specializing in this branch of the profession for twenty-odd years: having had service in Elgin and Kankakee State Hospitals, and for the past four years has been on the staff of Brentwood N. P. Hospital of Sawtelle Veterans Center at Los Angeles, California where he was Chief, Acute-intensive Treatment Service. He carries the title here of Director, Education and Research, and will work intimately with Dr. John R. Green of our Neurosurgical Unit. He will also be available for teaching of Residents, nurses, and attendants.

Dr. Schott, graduate of Western Reserve University, Cleveland, also came to us from Brentwood Veterans Administration where he has completed three years Resident training in psychiatry and neurology.

Every attempt is being made to form a well-balanced staff; at least 50% of whom are recognized and highly experienced and specially trained psychiatrists. Through this means we shall become a more independent, well rounded self-reliant institution with a minimum need for foreign talent and consulting co-workers: resulting in a concomitant economic saving.

All staffs have been reorganized, and authorities and responsibilities well defined. The esprit de corps has improved very much. Substandard salary scales have been adjusted upward, but in spite of this we are experiencing great difficulty in keeping a male attendant force enlisted to full strength. This will probably lessen as working conditions improve, and there are all indications that they will.

The functions of the Neurosurgical Unit, previously an independent organization, have been integrated with the hospital itself. This will result in better coordination of effort as well as mutual advantages to both organizations. Dr. John R. Green and his surgical staff will continue as before to render a high brand of service and research, which is rarely enjoyed at such a remote distance from large medical centers.

Staff plans in the future require additions of accredited and skilled psychiatric Occupational Therapists as the needs arise, plus an accredited Director of Psychiatric Nursing Education. The latter has already been selected and is now acquiring her final degree for such a position at the Arizona State College at Tempe. These additions are our only anticipated staff needs and requirements to qualify for accreditation at a later date by the American Psychiatric Association.

Once we secure approval of the A. P. A. it will no longer be necessary for undergraduate nurses of Arizona to go to another State in the Union to secure their affiliate training in psychiatry to qualify for graduation from their parent school as is now the



case. We should, therefore, be fully prepared to apply for such accreditation by the A. P. A. shortly after we move into the contemplated new units soon to be started.

Some consideration should be given to expansion of the present Out-Patient Department; however, great care will be exercised under this privilege that we do not encroach upon competitive fields in the endeavor to render public service of this nature.

#### PLANS AND RECOMMENDATIONS FOR THE COMING YEAR

Pursuant to our plans for approval by the A. P. A. and the opening of training for resident doctors and affiliate nurses, as well as possible graduate nurses training in psychiatry, it will be necessary to create certain additional units to the currently assured construction. I refer to a new Administration Building and a criminal or security building.

We have thoroughly outgrown the present administration building, which when vacated would supply us with a much needed home for affiliate nurses to which we have referred above. Nurses from all of the hospital training schools in the State who require affiliate psychiatric training for three months could be accommodated in this building with very little costs for remodeling and equipping. A new administration center should be located near the 24th Street entrance, and the future main entrance of the grounds should be transferred there where a gate presently exists. This building should provide the following:

- Director's office

- Business Manager's office, files and storage vault

- Information booth and switchboard

- Visitors reception room

- Medical Records office

- Supervisors' offices, and Superintendent of Nursing office

- Social Service office, and private consultation room

- Clinical Director's office, and a few Staff Physicians offices

- Large assembly room for Staff meetings, Board of Control meetings, scientific staff seminars, committing Court sessions, and nurses classroom.

- Office for Director of Education

- Dental suite

- Pharmacy and post office

- Library (medical and patient)

#### Basement:

- Pharmaceutical storage room

- Patient storage room (sorting, marking and acknowledging of Christmas packages)

- Telephone utility and supply room

- Storage for business office

The final construction need is for a separate fenced-in security building to isolate the criminally insane and the occasional bad behavior types of both sexes, with one wing for some 50 female



patients adjacent to another for some 75 male inmates. It is hardly necessary to point out that because of the lack of such a security facility many repeated escapes have occurred and much unnecessary disrepute brought upon the institution.

I recommend that under the program for remodeling the large concrete structure known as the central building, the east end, which is most acceptable for the service, be converted into an institutional commissary; and that the west end be prepared for an institutional canteen, this being the logical location for the same. The remainder of the structure should be converted into open wards for working patients of perhaps both sexes, and some provision be made in the program for housing the few employees now living on the immediate hospital grounds. The building now housing these few employees and also the offices of supervisors and superintendent of nursing should be razed. Near the east end of the central building another small frame building known as E Ward (presently occupied by elderly female patients and some working patients) is likewise a fire hazard and should be razed as soon as possible. The removal of the commissary from its present inadequate quarters will provide for expansion of the cafeteria next door which has also been cramped for want of additional space.

With the clouds slowly retreating over the horizon, our prime objective remaining at this time is to get approval by the American Psychiatric Association, after which all lesser objectives indicated above can become a reality with very little effort. I trust that the remaining two-thirds of our child population can be transferred to the Children's Colony at Randolph in the very early future.

My report may be remiss in its failure to acknowledge many kindnesses not given space here. In going over the many past rosy annual reports (I do not mean to be unduly critical), I have noted that they exude a fragrance rarely surpassed, and it has indeed made me diffident at this time to give vent to any growing high-minded pledges with their high-minded purposes which are so reassuring but which accomplish so little per se.

When I came here I felt that the job posed as big a problem as ever, and the challenge it evoked was most instrumental in my acceptance. I can only suggest this early in my career that you keep an eye on Arizona State Hospital for the ensuing year. My motto which appears before me daily on my desk affords me pleasure to quote:

The wisest thing, we suppose,  
that a man can do for his land,  
Is the work that lies under his nose,  
with the tools that lie under his hand.

I pay you my salutations for the new year, and extend my deep gratitude for your thoughtfulness and splendid assistance.

Sincerely,  
M. W. Conway, M. D.  
Director



## CLINICAL DIRECTOR'S ANNUAL REPORT

This year all reports pertaining to the patient population, including those from the neurosurgical unit, pharmacy, X-ray, dental office, laboratory, and record room, will be listed under the clinical director's report. This is being done under the assumption that everything pertaining to the care and treatment of our patients should be grouped under such a heading.

Maintaining good public relations and keeping an interested citizenry informed on what we are trying to do for our patients will pay good dividends in helping us reach the goal we are constantly trying to achieve, namely, to have a state hospital that is second to none. During the past fiscal year an estimated 2,000 people, excluding relatives and friends of patients, visited the hospital with the purpose of being better informed on various aspects of mental illness and state hospital facilities. They consisted of members of civic organizations such as Men's and Women's Clubs, numerous college and high school classes, groups of Social and Welfare workers, public health and psychology students, etc. These groups ranged in size from six to a hundred or more. In several instances clinics or short talks were arranged for students in advanced psychology, public health, and sociology. A dental clinic was also held, which was attended by dentists from all sections of the state. In November, 1951, the Community Council of Phoenix held its monthly meeting at the hospital under the auspices of the Arizona Association of Mental Health.

The Gray Ladies visited the hospital each week, providing entertainment for the adult patients, recreation for the children, taking groups on walks, and furnishing refreshments and clothing, which the patients gratefully accepted. Their efforts in behalf of our patients are deeply appreciated. A series of six lectures, each an hour or more in length, was given to the Gray Ladies by the clinical director in order to familiarize them with problems to be met in working with mental patients and also advise them on hospital policies. The Gray Ladies have now presented the hospital with a television set for each ward, so that it is possible for every patient to enjoy television programs.

The Department of Public Health sent its mobile unit to the hospital in June in order to conduct a chest survey of the entire patient and employee population. Annual surveys of this type will help us in detecting early cases of tuberculosis, segregating known cases from the rest of the population, and thereby reducing the incidence of tuberculosis to a minimum.

Fingerprinting of all new patients has been established as a regular routine. This means of checking into a patient's background often provides us with valuable information as to previous arrests, criminal records, or commitments to state hospitals. The hospital can, if deemed necessary, make further investigations on the basis of information gleaned from the fingerprint record.



There are several projects now in the planning stage, which we hope to put into effect during the coming fiscal year, all with the thought of improving our services, and providing better and more efficient care and treatment.

One important project that requires our immediate attention is a training program for our attendants and nurses. Up to the present time these people received no instructions as to their duties, how to handle mentally ill patients, what to expect from patients, or how to keep a ward clean and presentable. Their present knowledge has been gained through trial and error, by word of mouth from fellow workers, or through other unsatisfactory methods. No matter how sincere and interested an attendant may be in his work, if he has not received the basic training for his job, the ultimate recovery of a patient can be seriously hindered by this deficiency. Hence, we propose to develop a training course to fit the employee to his job, and he must successfully pass such a course to hold his job. Being grounded in the fundamentals of his work will greatly increase the attendant's confidence and usefulness to the hospital.

We are also hoping to expand our occupational and recreational therapy facilities so that as many patients as possible can be reached through these means. Recreational and occupational therapies are important weapons in our armamentarium to treat mental illness. Even those patients who are not likely to get well and can be considered permanent residents, will make a far better institutional adjustment, will present less of a management problem, and will be much happier and contented, if given a busy schedule of activity. Recreational therapy will tend to overcome the dreaded monotony and ennui which aggravate and hasten mental deterioration. Such a program has already been started on a limited scale by taking groups of patients for regular walks or strolls about the grounds, as this can be done by the attendants assisted by the Gray Ladies.

Another clinical improvement, which will be put into effect during the next fiscal year, is that all prospective employees will be required to undergo a physical examination. This will eliminate those who are physically unfit to carry out their duties, and who, for that reason, are a liability rather than an asset to the institution.

It is our hope to improve the clinical services wherever possible and as rapidly as possible, and we will constantly strive toward that end. With these prefacing comments, the following reports from the various departments outline the work that has been done in the fiscal year 1951-1952.

A. H. WOLFF, M. D.

Clinical Director



## MEDICAL STAFF REPORT

July 1, 1951 to June 30, 1952

Number of staff meetings held during year	201
Number of patients seen at staff meetings	1369
Surgery performed, (not including NSU)	61
Number of treatments given in minor surgery and dressing rooms	4785

## Electric shock therapy:

99 Male patients received 1244 treatments

213 Female patients received 3088 treatments

## Insulin coma therapy:

Male patients 27

Female patients 42

## Changes in Medical Staff:

6 Physicians left by resignation or death

8 Physicians joined the staff during the fiscal year.

## CLINICAL PSYCHOLOGIST'S REPORT

Number of patients seen	233
Number of tests administered	439



## NEURO-SURGICAL UNIT REPORT

July 1, 1951 to June 30, 1952

1. The Neuro-Surgical Unit of the Arizona State Hospital was instituted on 1 July 1949 for the purpose of:

- a. Consultations in behalf of the patients of the Arizona State Hospital and indigent out-patients with **neuro-psychiatric** and **neuro-surgical** disorders of the nervous system, and a qualified consultant service for the hospital laboratories of X-ray, pathology and electroencephalography.
- b. Evaluation and specialized care of patients with **epilepsy** and those considered by the staff to be suitable candidates for **psycho-surgery**.
- c. Providing material for a monthly Clinicopathological Conference for the staff and medical profession, and to carry on a clinical research program in the field of nervous and mental diseases.

2. **PERSONNEL:** The Neuro-Surgical Unit commenced operation on 1 July 1951 with the following personnel:

John R. Green, M.D., Director and consultant in neuro-surgery and electroencephalography

Richard E. H. Duisberg, M.D., Consultant in neuropsychiatry

William B. McGrath, M.D., Consultant in neuropsychiatry

Donald H. Victor, M.D., Assistant in neuropsychiatry and neuro-surgery

Edward H. Bregman, M.D., Consultant in Roentgenology

Harold Wood, M.D., Consultant in Pathology

Elgie Smith, Clinical Psychologist

Dorothea Moeller, Master EEG technician

Mrs. Lelah Adler, R.N., Directress of Occupational Therapy

Mrs. Jane Shelton, Administrative Assistant

On 5 July 1951, Mrs. Jewell Ancell was employed as secretary. On 20 July 1951 Mrs. Shelton terminated her employment as Administrative Assistant and was replaced by Mrs. Ancell. On 13 August 1951 Mrs. JoAnn Watson was employed as secretary. On 29 August 1951 Dr. Harold Wood terminated his services as Consultant Pathologist and was replaced by Dr. Laurel Stapley on 20 September 1951. On 5 March 1952 Dr. William McGrath terminated his services as Consultant in Neuropsychiatry. On 22 March 1952 Mrs. Watson terminated her employment as secretary. On 10 April 1952 Dr. R. E. H. Duisberg terminated his services as Consultant in Neuropsychiatry.



3. **PROCEDURES:** The following types of procedures were conducted by the Neuro-Surgical Unit during the fiscal year of 1951-52:

Neuropsychiatric consultations, including neuropsychiatric examinations and progress studies.  
 Neuro-surgical and neurologic examinations  
 Psychometric examinations  
 Electroencephalography  
 Pneumoencephalography  
 Pathologic analyses  
 Roentgenologic interpretations  
 Medical examinations  
 Family interviews  
 Occupational therapy  
 Surgery

4. **NEUROPSYCHIATRIC CONSULTATIONS:**

a. **Neuropsychiatric Examinations:** The following neuropsychiatric examinations were performed by the Neuro-Surgical Unit during 1951-52:

- (1) Dr. R. E. H. Duisberg: 105 examinations  
 Dr. W. B. McGrath: 32 examinations

- (2) The patients thus examined fall into the following classifications:

	Preoperative	Postoperative
Committed Patients	80	9
Voluntary Patients	15	0
Out-Patients	27	6
	—	—
	122	15

TOTAL: 137

b. **Progress Studies:** The following progress studies were performed by the Neuro-surgical Unit during 1951-52:

- (1) Dr. R. E. H. Duisberg: 207 examinations  
 Dr. W. B. McGrath: 38 examinations  
 Dr. D. H. Victor: 242 examinations

- (2) The patients thus examined fall into the following classifications:

	Preoperative	Postoperative
Committed Patients	266	70
Voluntary Patients	16	2
Out-Patients	96	37
	—	—
	378	109

TOTAL: 487



5. **NEURO-SURGICAL CONSULTATIONS** (Including neurologic examinations): The following neuro-surgical consultations were held during the fiscal year 1951-52 in the Neuro-Surgical Unit:

- a. Dr. J. R. Green: 80 examinations  
Dr. R. E. H. Duisberg: 55 examinations  
Dr. W. B. McGrath: 14 examinations
- b. The patients thus examined fall into the following classifications:

	Preoperative	Postoperative
Committed Patients	48	31
Voluntary Patients	23	8
Out-Patients	30	9
	<hr/>	<hr/>
	101	48

TOTAL: 149

6. **PSYCHOMETRIC DETERMINATIONS:** The following psychometric determinations were made by the Neuro-Surgical Unit during 1951-52:

- a. Mr. Elgie Smith: 194 examinations
- b. The patients thus tested fall into the following classifications:

	Preoperative	Postoperative
Committed Patients	173	2
Voluntary Patients	7	0
Out-Patients	7	5
	<hr/>	<hr/>
	187	7

TOTAL: 194

7. **ELECTROENCEPHALOGRAPHY:** During the fiscal year of 1951-52 the following electroencephalograms were done by the Neuro-Surgical Unit and read by the Director:

	Preoperative	Postoperative	Surgical
Committed Patients	138	46	0
Voluntary Patients	24	3	1
Out-Patients	77	11	0
	<hr/>	<hr/>	<hr/>
	239	60	1

TOTAL: 300



8. **PNEUMOENCEPHALOGRAPHY:** During the fiscal year 1951-52 the following pneumoencephalograms were done by the Neuro-Surgical Unit:

- a. Dr. J. R. Green: 29 pneumoencephalograms
- b. The patients fall into the following classifications:

	Preoperative	Postoperative
Committed Patients	19	0
Voluntary Patients	9	1
	—	—
	28	1

TOTAL: 29

9. **PATHOLOGIC EVALUATIONS:** During the fiscal year of 1951-52 the consultant pathologist of the Neuro-Surgical Unit, Dr. Harold Wood, made 4 visits to the hospital for the purpose of evaluating surgical specimens. Dr. Laurel Stapley made 13 visits to the hospital for the purpose of evaluating surgical specimens and one visit to perform a post-mortem on a deceased patient.

10. **ROENTGENOLOGIC INTERPRETATIONS:** During the fiscal year 1951-52 the consultant roentgenologist of the Neuro-Surgical Unit, Dr. E. H. Bregman, made 26 visits to the Unit for the purpose of interpreting all X-ray films made in the Arizona State Hospital.

11. **MEDICAL CONSULTATIONS:** During 1951-52 the following medical consultations were held in the Neuro-Surgical Unit:

- a. Dr. L. K. Swasey, Internist: 3 examinations  
Dr. D. P. Haislip, Internist: 13 examinations  
Dr. B. P. Frissell, Internist: 7 examinations
- b. The patients thus examined fall into the following classifications:

	Preoperative	Postoperative
Committed Patients	14	1
Voluntary Patients	4	4
	—	—
	18	5

TOTAL: 23

12. **FAMILY INTERVIEWS:** During the fiscal year 1951-52 the families of 41 patients were seen in 61 consultations in the Neuro-Surgical Unit as follows:

- Dr. J. R. Green: 20 interviews
- Dr. R. E. H. Duisberg: 38 interviews
- Dr. W. B. McGrath: 3 interviews



13. **OCCUPATIONAL THERAPY:** During the fiscal year of 1951-52, 303 patients have visited Occupational Therapy, with a total of 3067 visits over 126 days and 9456 hours. The visits by the patients fall into the following classifications:

	Preoperative	Postoperative
Committed Patients	1632	1315
Voluntary Patients	84	36
	<hr/>	<hr/>
<b>TOTAL:</b> 3067	1716	1351

14. **SURGERY:** During the year 1951-52 the following surgical procedures have been performed in the Neuro-Surgical Unit:

a. Dr. J. R. Green: 19

b. These procedures fall into the following classifications:

	Committed Patients	Voluntary Patients
Focal Epilepsy	0	1
Psycho-surgery	9	0
Craniotomy	0	1
Other:		
Ventriculogram	0	2
Carotid Angiography	0	2
Lumbar Puncture	1	1
Trephination	2	0
	<hr/>	<hr/>
<b>TOTAL:</b> 19	12	7

c. The services of the surgical assistant, Dr. Victor, have been utilized for these procedures as follows:\*

	TL	FL	Other
Dr. D. H. Victor	1	8	5

15. **ANESTHESIA:** The services of the following anesthetists have been utilized by the Neuro-Surgical Unit during 1951-52:\*

	TL	FL	PEG	EEG	Other
Dr. W. A. Reed	0	2	11	0	1
Dr. A. G. Urry	1	2	6	0	3
Dr. J. L. Ford	0	3	8	0	0
Dr. R. L. Maresca	0	1	2	1	1
Miss Alice Richards	0	1	2	0	2

In addition Dr. Maresca made three visits to the hospital for follow-up care on a postoperative patient.



16. Special nurses were provided for all patients who underwent major surgical procedures in the Neuro-Surgical Unit. Their period of supervision and care usually was continued for one week postoperatively, longer when deemed necessary for the welfare of the patient.

17. Two times during the course of the fiscal year the Phoenix branch of the U. S. Department of Indian affairs was generous enough to provide the Unit with the services of a Navajo Interpreter to enable us to obtain neuropsychiatric determinations on non-English speaking patients. Mr. Charles Shirley made two visits to provide progress studies on nine committed patients.

\*The following abbreviations were used to indicate the several types of procedures: TL—Temporal Lobectomy; FL—Frontal Lobotomy; PEG—Pneumoencephalogram; EEG—Electroencephalogram.

#### 18. SCIENTIFIC MEETINGS:

- (1) Association for Research in Nervous and Mental Diseases, New York City, December 15, 1951. Joint paper combining work of University of Illinois and Arizona State Hospital workers on "Treatment of Psychomotor States by Anterior Temporal Lobectomy." Presented by Dr. F. A. Gibbs, Chicago. Attended by Dr. Green.
- (2) Western Neurological Association (joint meeting of Southern California Neurosurgical Society, San Francisco Neurological Society, and Western Electroencephalographic Society), Del Monte Lodge, Pebble Beach, California, March 1, 1952. Paper presented on "Orbitofrontal Lobotomy" by Drs. Green, Duisberg and McGrath.
- (3) Arizona Medical Association, May 1, 1952. "Results of 100 Craniotomies at the Arizona State Hospital." Paper presented by Drs. Green, Duisberg and McGrath.
- (4) 60th birthday party in honor of Dr. Percival Bailey:—Scientific session, University Club, Chicago. "Present Status of 28 Patients with Psychomotor Epilepsy, Treated by Anterior Temporal Lobectomy." Paper presented by Dr. Green.

#### 19. PUBLICATIONS:

- (1) J. R. Green, R. E. H. Duisberg and W. B. McGrath: "Focal Epilepsy of Psychomotor Type," a preliminary report of observations on effects of surgical therapy. *Journal of Neuro-Surgery*, 8: 157-172, 1951.



- (2) J. R. Green, R. E. H. Duisberg and W. B. McGrath:  
"Electrocorticography in Psychomotor Epilepsy."  
EEG and Clinical Neurophysiology, 3: 293-299, 1951.
- (3) P. Bailey, J. R. Green, L. Amador and F. A. Gibbs:  
"Treatment of Psychomotor States by Anterior Tem-  
poral Lobectomy," a report of progress. Read before  
the Association for Research, Nervous and Mental  
Diseases, New York, December 15, 1951.
- (4) J. R. Green, R. E. H. Duisberg, and W. B. McGrath:  
"Orbitofrontal Lobotomy. With Reference to Effects  
on 55 Psychotic Patients." Journal of Neurosurgery  
(in press).
- (5) J. R. Green, R. E. H. Duisberg and W. B. McGrath:  
"Results of 100 Craniotomies at the Arizona State  
Hospital." Arizona Medicine (in press).

JOHN RAYMOND GREEN, M. D .

Director

Neuro-Surgical Unit



## MOVEMENT OF PATIENT POPULATION

July 1, 1951 to June 30, 1952

	Male	Female	Total
In Hospital 7-1-51 .....	844	724	1568
On Conditional Discharge .....	90	100	190
On Short Term Leave .....	27	43	70
On Escape .....	116	15	131
	<hr/>	<hr/>	<hr/>
Total on the Books .....	1077	882	1959
Admissions 7-1-51 through 6-30-52 .....	411	286	697
Re-admissions .....	63	70	133
Returned from Conditional Discharge.....	41	63	104
Returned from Short Term Leave.....	30	62	92
Returned from Escape .....	30	12	42
	<hr/>	<hr/>	<hr/>
Total Admissions .....	575	493	1068
	<hr/>	<hr/>	<hr/>
Total patients treated .....	1652	1375	3027

## SEPARATIONS

Discharged from Hospital .....	327	173	500
Discharged while on Conditional Dis- charge, Escape or Short Term Leave.....	213	113	326
	<hr/>	<hr/>	<hr/>
Total Discharged .....	540	286	826
Deaths in Hospital .....	87	67	154
Deaths while on Conditional Discharge, Escape, etc. ....	1	2	3
	<hr/>	<hr/>	<hr/>
Total Deaths .....	88	69	157
	<hr/>	<hr/>	<hr/>
Total Separations .....	628	355	983
In Hospital 6-30-52 .....	834	762	1596
On Conditional Discharge .....	72	117	189
On Short Term Leave .....	0	2	2
On Escape .....	19	4	23
	<hr/>	<hr/>	<hr/>
Total on Books .....	925	885	1810



## FIRST ADMISSIONS

Mental Diagnosis	Male	Female	Total
1. Psychosis with Syphilitic Meningo-Encephalitis .....	7	2	9
2. Psychosis with other forms of Syphilis of the Central Nervous System.....	8	3	11
3. Psychosis with Epidemic Encephalitis....	0	1	1
4. Psychosis with other Infectious Diseases	2	0	2
5. Alcoholic Psychosis .....	49	6	55
6. Psychosis due to Drugs or other Exogenous Poisons .....	3	1	4
7. Traumatic Psychosis .....	2	0	2
8. Psychosis with Cerebral Arteriosclerosis	71	39	110
9. Psychosis with other Disturbances of Circulation .....	4	6	10
10. Psychosis with Convulsive Disorders (Epilepsy) .....	14	6	20
11. Senile Psychosis .....	11	6	17
12. Involutional Psychosis .....	4	12	16
13. Psychosis due to other Metabolic, etc., Diseases .....	2	2	4
14. Psychosis due to new growth.....	0	1	1
15. Psychosis with Organic Changes of the Nervous System .....	7	4	11
16. Psychoneurosis .....	5	6	11
17. Manic Depressive .....	12	10	22
18. Schizophrenia (Dementia Praecox).....	101	102	203
19. Paranoia and Paranoid Conditions.....	1	4	5
20. Psychosis with Psychopathic Personality	3	1	4
21. Psychosis with Mental Deficiency.....	5	2	7
22. Undiagnosed Psychoses .....	10	14	24
23. Without Psychosis .....	88	57	145
24. Primary Behavior Disorders.....	2	1	3
TOTAL .....	411	286	697



## RE-ADMISSIONS

July 1, 1951 to June 30, 1952

Mental Diagnosis		Male	Female	Total
1.	Psychosis with Syphilitic Meningo-Encephalitis .....		....	....
2.	Psychosis with other forms of Syphilis of the Central Nervous System.....	1	....	1
3.	Psychosis with Epidemic Encephalitis....	....	....	....
4.	Psychosis with other Infectious Diseases .....		....	....
5.	Alcoholic Psychosis .....	7	2	9
6.	Psychosis due to Drugs or other Exogenous Poisons .....		....	....
7.	Traumatic Psychosis .....	2	....	2
8.	Psychosis with Cerebral Arteriosclerosis	8	....	8
9.	Psychosis with other Disturbances of Circulation .....		....	....
10.	Psychosis with Convulsive Disorders (Epilepsy) .....	2	5	7
11.	Senile Psychosis .....		....	....
12.	Involutional Psychosis .....		1	1
13.	Psychosis due to other Metabolic, etc., Diseases .....		....	....
14.	Psychosis due to new growth.....		....	....
15.	Psychosis with Organic Changes of the Nervous System .....		1	1
16.	Psychoneurosis .....	1	1	2
17.	Manic Depressive .....		8	8
18.	Schizophrenia (Dementia Praecox).....	22	31	53
19.	Paranoia and Paranoid Conditions.....		1	1
20.	Psychosis with Psychopathic Personality .....		....	....
21.	Psychosis with Mental Deficiency.....		1	1
22.	Undiagnosed Psychoses .....	1	3	4
23.	Without Psychosis .....	19	15	34
24.	Primary Behavior Disorders.....		1	1
TOTAL .....		63	70	133



DISCHARGED  
MALE

Mental Diagnosis		While on Recov'd Impv'd Unimpv'd C.D. or Esc.			
1.	Psychosis With Syphilitic Meningo-Encephalitis .....	1	1	8	
2.	Psychosis with other forms of Syphilis of the Central Nervous System .....	1	1	5	
3.	Psychosis with Epidemic Encephalitis .....				
4.	Psychosis with other Infectious Diseases .....	1			
5.	Alcoholic Psychosis .....	18	29	4	8
6.	Psychosis due to Drugs or other Exogenous Poisons .....	2	2		
7.	Traumatic Psychosis .....		2	1	8
8.	Psychosis with Cerebral Arteriosclerosis .....	2		8	10
9.	Psychosis with other Disturbances of Circulation .....			2	
10.	Psychosis with Convulsive Disorders (Epilepsy) .....	1	2	1	6
11.	Senile Psychosis .....		1	1	4
12.	Involutional Psychosis .....	1	3		4
13.	Psychosis due to other Metabolic, etc, Diseases .....	1			
14.	Psychosis due to new growth .....				
15.	Psychosis with Organic Changes of the Nervous System.....			3	1
16.	Psychoneurosis .....		3	1	5
17.	Manic Depressive .....		4		7
18.	Schizophrenia (Dementia Praecox) .....	2	56	13	88
19.	Paranoia and Paranoid Conditions .....			3	2
20.	Psychosis with Psychopathic Personality .....				5
21.	Psychosis with Mental Deficiency .....			1	4
22.	Undiagnosed Psychoses .....	1	1	1	5
23.	Without Psychosis .....			148	42
24.	Primary Behavior Disorders .....			4	1
Total .....		30	104	193	213



DISCHARGED  
FEMALE

July 1, 1951 to June 30, 1952

Mental Diagnosis		While on Recov'd Impv'd Unimpv'd C.D. or Esc.		
1.	Psychosis with Syphilitic Meningo-Encephalitis .....	----	----	2
2.	Psychosis with other forms of Syphilis of the Central Nervous System .....	1	----	----
3.	Psychosis with Epidemic Encephalitis .....	----	----	----
4.	Psychosis with other Infectious Diseases .....	----	----	----
5.	Alcoholic Psychosis ..... 6	2	----	3
6.	Psychosis due to Drugs or other Exogenous Poisons .....	1	----	----
7.	Traumatic Psychosis .....	----	----	1
8.	Psychosis with Cerebral Arteriosclerosis .....	----	8	3
9.	Psychosis with other Disturbances of Circulation .....	1	----	1
10.	Psychosis with Convulsive Disorders (Epilepsy) .....	----	5	1
11.	Senile Psychosis .....	----	1	5
12.	Involutional Psychosis .....	4	----	9
13.	Psychosis due to other Metabolic, etc., Diseases .....	----	----	1
14.	Psychosis due to new growth.....	----	----	1
15.	Psychosis with Organic Changes of the Nervous System .....	1	----	2
16.	Psychoneurosis ..... 1	4	1	3
17.	Manic Depressive .....	1	3	15
18.	Schizophrenia (Dementia Praecox) .....	19	9	51
19.	Paranoia and Paranoid Conditions .....	3	----	1
20.	Psychosis with Psychopathic Personality .....	----	----	1
21.	Psychosis with Mental Deficiency .....	----	2	1
22.	Undiagnosed Psychoses .....	3	----	2
23.	Without Psychosis .....	----	99	10
24.	Primary Behavior Disorders .....	----	1	----
TOTAL .....		7	37	129
				113



## DEATHS

July 1, 1951 to June 30, 1952

Mental Diagnosis		Male	Female	Total
1.	Psychosis with Syphilitic Meningo-Encephalitis .....	4	....	4
2.	Psychosis with other Forms of Syphilis of the Central Nervous System.....	8	....	8
3.	Psychosis with Epidemic Encephalitis....	....	2	2
4.	Psychosis with other Infectious Diseases .....	....	....	....
5.	Alcoholic Psychosis .....	1	1	2
6.	Psychosis due to Drugs or other Exogenous Poisons .....	....	....	....
7.	Traumatic Psychosis .....	....	....	....
8.	Psychosis with Cerebral Arteriosclerosis	35	20	55
9.	Psychosis with other Disturbances of Circulation .....	2	2	4
10.	Psychosis with Convulsive Disorders (Epilepsy) .....	1	5	6
11.	Senile Psychosis .....	12	14	26
12.	Involutional Psychosis .....	1	3	4
13.	Psychosis due to other Metabolic, etc., Diseases .....	2	1	3
14.	Psychosis due to new growth .....	....	....	....
15.	Psychosis with Organic Changes of the Nervous System .....	3	....	3
16.	Psychoneurosis .....	....	....	....
17.	Manic Depressive .....	2	2	4
18.	Schizophrenia (Dementia Praecox).....	6	6	12
19.	Paranoia and Paranoid Conditions.....	....	....	....
20.	Psychosis with Psychopathic Personality .....	....	....	....
21.	Psychosis with Mental Deficiency.....	2	....	2
22.	Undiagnosed Psychoses .....	....	3	3
23.	Without Psychosis .....	5	8	13
24.	Primary Behavior Disorders.....	....	....	....
	Undiagnosed .....	4	2	6
TOTAL .....		88	69	157



## MOVEMENT OF PATIENT POPULATION BY COUNTIES

July 1, 1951 to June 30, 1952

County	Received	Ret'd From Cond. Disch. Escape. Etc.	Con. Disch. Escape, and Short. Tm. Lv.	Dis- charged	Expired
Apache .....	7	4	4	6	2
Cochise .....	15	3	10	16	9
Coconino .....	15	2	2	11	3
Gila .....	25	6	12	25	9
Graham .....	8	1	1	10	....
Greenlee .....	11	1	5	7	1
Maricopa .....	564	161	231	586	82
Mohave .....	3	2	....	2	....
Navajo .....	5	3	3	14	6
Pima .....	104	27	72	78	25
Pinal .....	35	11	12	41	5
Santa Cruz .....	6	4	9	8	4
Yavapai .....	17	9	8	8	6
Yuma .....	15	4	13	14	5
	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL .....	830	238	382	826	157

TOTAL NUMBER OF PATIENTS COMMITTED TO  
ARIZONA STATE HOSPITAL DURING  
THE PAST TEN YEARS

Year	Male	Female	Total
1942 .....	265	164	429
1943 .....	264	177	441
1944 .....	278	203	481
1945 .....	323	193	516
1946 .....	342	215	557
1947 .....	338	232	570
1948 .....	381	258	639
1949 .....	453	267	720
1950 .....	495	327	822
1951 .....	391	335	726
	<hr/>	<hr/>	<hr/>
TOTAL .....	3530	2371	5901



## MOVEMENT OF FOREIGN POPULATION

July 1, 1951 to June 30, 1952

	In Hosp. 7-1-51	Rec'd.	C. D., Esc.,* S. Tm. Leave	Ret'd.	Dis- charged	De- ported	In Hosp. Died 6-30-52	
Austria .....	14	1	1	1	....	....	....	15
Canada .....	4	3	1	....	....	....	1	5
China .....	2	....	....	....	....	....	....	2
Cuba .....	1	....	....	....	....	....	....	1
Denmark .....	1	....	....	....	....	....	....	1
East Prussia .....	1	....	1	....	....	....	....	....
England .....	2	1	1	....	2	....	....	....
Finland .....	1	....	....	....	....	....	....	1
France .....	1	....	....	....	....	....	....	1
Germany .....	8	7	1	....	6	....	2	6
Greece .....	4	3	1	....	1	....	....	5
Hungary .....	....	1	....	....	1	....	....	....
Ireland .....	2	3	1	....	....	....	1	3
Italy .....	....	2	2	1	....	....	....	1
Jamaica .....	1	....	....	....	....	....	....	1
Japan .....	2	....	....	....	....	....	....	2
Lithuania .....	....	1	1	....	....	....	....	....
Mexico .....	45	26	21	7	4	1	12	40
Norway .....	....	2	....	....	....	....	....	2
Poland .....	4	2	....	....	....	....	....	6
Rumania .....	2	....	....	....	....	....	....	2
Russia .....	4	1	....	....	....	1	....	4
Scotland .....	3	....	....	....	....	....	....	3
Spain .....	5	....	....	....	....	....	1	4
Sweden .....	6	....	....	....	....	....	....	6
Switzerland .....	1	....	....	....	....	....	1	....
Turkey .....	....	1	....	....	....	....	....	1
Yugoslavia .....	....	1	....	....	....	....	....	1
TOTAL .....	114	55	31	9	14	2	18	113

\*C.D.—Conditional Disch.; Esc.—Escape; S.T.M. Leave—Short Term Leave.



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LENGTH OF RESIDENCE OF PATIENTS IN HOSPITAL  
AS OF JUNE 30, 1952

	Male	Female	Total
Less than 1 year .....	105	154	259
1 year to 4 years .....	258	220	478
5 years to 10 years.....	220	170	390
11 years to 15 years .....	92	78	170
16 years to 20 years .....	43	40	83
21 years to 30 years .....	75	63	138
31 years to 40 years .....	29	29	58
41 years to 50 years .....	10	6	16
51 years to 60 years .....	2	2	4
	<hr/>	<hr/>	<hr/>
TOTAL .....	834	762	1596



LABORATORY REPORT  
July 1, 1951 to June 30, 1952

Urinalysis .....	1,404
Hgb. RBC. WBC. ....	892
Differential & Leucocyte Count .....	487
Malarial Smears .....	5
Sedimentation Rate .....	122
Platelet Count .....	53
Clot Retraction .....	48
Bleeding Time .....	9
Coagulation Time .....	9
Blood Typing (Group RH) .....	66
Cross Matching .....	61
Icterus Index .....	50
Vandenbergh .....	5
N. P. N. ....	40
Blood Sugar .....	62
Glucose Tolerance .....	57
Cholesterol .....	5
Blood Bromide .....	2
Serum—Total Protein .....	2
Albumin—Globulin Ratio .....	2
Spinal Fluid—Cell Count .....	254
Spinal Fluid—Globulin (Pandy) .....	253
Spinal Fluid—Total Protein .....	241
Spinal Fluid—Colloidal Gold .....	253
Papanicalaou .....	57
Gram Stain .....	8
Acid-fast Stain for TB Bacilli (Sputums and Gastrics) .....	79
Basal Metabolism .....	25
Feces Examinations .....	29
Blood Serologies .....	896
Spinal Fluid Serologies .....	254
Agglutinations .....	39
Blood Cultures .....	3
Sputum Cultures .....	3
Miscellaneous Cultures .....	4
Biopsies .....	25
Cephalin Flocculation .....	1
TOTAL .....	5,805



## X-RAY DEPARTMENT REPORT

July 1, 1951 to June 30, 1952

Chest Plates .....	837	Zygomatic Arch .....	1
Chest Plates (Employees) ....	100	Mastoids .....	2
Fractures .....	49	Abdomen for Pregnancy .....	4
Fractures, Hips .....	35	Fractures Pinned in Surgery	5
Pneumoencephalograms .....	27	Routine .....	615
Spines, Lumbar .....	20	Rechecks .....	122
Abdomen .....	31	Extremities .....	246
G. I. Series .....	12	Skulls .....	37
Barium Enemas .....	10	Shoulders .....	17
Fluoroscopy .....	54	Spines, Dorsal .....	19
E. K. G.s .....	91	Spines, Cervical .....	7
Films used:		Noses .....	8
14x17 .....	870	Jaws .....	12
10x12 .....	375	Sella Turcica .....	2
8x10 .....	76	Sternum .....	4
7x17 .....	30	Gall Bladder Series .....	9
5x7 .....	14	Elbows .....	4
—	1365	Sinuses .....	4
Photographs taken .....	633	Ribs .....	4
Prints developed .....	633	Coccyx .....	4
I. V. Pyelograms .....	5	Os Calcis .....	3
Ventriculograms .....	4	Out Patients .....	6
Arteriograms .....	2	Full Plates of Infants .....	5

## DENTAL REPORT

July 1, 1951 to June 30, 1952

Examinations .....	554	Post-operative Treatments ..	634
Cleanings .....	281	Pyorrhea .....	685
Fillings:		Plate Repairs .....	53
Amalgam .....	66	Impressions .....	51
Porcelain .....	51	Bite .....	49
Temporary Fillings .....	53	Try in .....	62
Adjust Plates .....	355	Ward Calls .....	72
Place Plates:		Penicillin .....	68
Full Sets .....	32	X-Rays .....	170
Upper .....	9	General Anesthetic .....	7
Lower .....	2	Lance Abscesses .....	7
Partials .....	2	Night Calls .....	2
Extractions .....	1085	Number of Patients Seen .....	2940



## PHARMACY DEPARTMENT REPORT

July 1, 1951 to June 30, 1952

Requisitions Filled..... 5,565

Items Supplied.....24,992

## Manufactured:

1. Liquids .....793 gallons

Includes: Antiseptic Oil, Calamine Lotion, Cascara, Deodorant Spray, Hand Lotion, Instrument Sterilizing Solution, Chloroform Liniment, Kaolin-Pectin Mixture, Rubbing Compound, Surgical Soap, Paregoric, Tincture Zephiran, Cough Syrup, Dobell's Solution, Elixir Terpin Hydrate, Elixir Iron, Quinine and Strychnine, Elixir Phenobarbital, etc.

2. Powders ..... 85 pounds

Includes: Antiseptic Talcum, First Aid Powder, Fungicide Powder.

3. Ointments .....122 pounds

Includes: Bed Sore Ointment, Chlorophyll, Fungicide, Sulfathiazole, Electrode Paste, Methyl Salicylate, etc.

4. Injectable Solutions.....18,550 cc.

Includes: Novocain, Thiamin, Pentobarbital, Water for Injection, Narcotic Solutions.

## Specimen Savings by Manufacturing:

1. Cascara:

To purchase 1 gallon	\$10.80
To make 1 gallon	2.15
Saving to hospital	<hr/>
per gallon	\$ 8.65 (used 22 gallons)

2. Chlorophyll Ointment:

To purchase 1 pound	\$ 8.00
To make 1 pound	.70
Savings to hospital	<hr/>
per pound	\$ 7.30 (used 66 pounds)

3. Pentobarbital Solution:

To purchase 3600 cc	\$441.45
Cost to make 3600 cc.	29.52
	<hr/>
Savings to hospital	\$411.93 (used 3600 cc.)

## Other Activities:

Lectures to our nurses on Drugs and Pharmacology. Presented a paper at the convention of the Arizona Hospital Association. Gave lectures to the senior class of the College of Pharmacy and Nurses' Association Annual Refresher Course.







**ARIZONA STATE HOSPITAL**

*Annual Report*  
*Of The*  
*Business Manager*

**July 1, 1951 to June 30, 1952**



EXPENDITURE REPORT  
July 1, 1951 to June 30, 1952

	Appropriations Collections Fund Balances	Expended	Balance 6-30-52	Reverted to Gen. Fund	Forward to 1952-53
1-3-11-000-0100 Salaries & Wages .....	\$ 754,000.00	\$ 742,677.41	\$ 11,322.59	\$11,322.59	\$
1-3-11-000-0101 Salaries - Hospi- tal Personnel .....	25,500.00	22,368.20	3,131.80	3,131.80	.....
1-3-11-000-0200 Current Expendi- tures - Other .....	566,800.00	550,528.19	16,271.81	16,271.81	.....
1-3-11-000-0800 Special Operating .....	110,743.30	103,332.89	7,410.41	7,410.41	.....
1-3-11-000-1000 Advanced Curative Treatment .....	37,012.63	36,971.37	41.26	.....	41.26
1-2-11-000-0300 Subscriptions & Organization Dues .....	100.00	100.00	.....	.....	.....
2-3-11-000-0700 Edowment Earnings	24,352.01	15,561.41	8,790.60	.....	8,790.60
1-3-11-000-0401 Travel - State .....	1,600.00	1,572.25	27.75	27.75	.....
1-3-11-000-0402 Travel - Out of State .....	5,000.00	2,040.12	2,959.88	2,959.88	.....
1-3-11-000-0501 Capital Outlay— Equipment .....	10,000.00	9,996.73	3.27	3.27	.....
1-3-11-000-0502 Capital Outlay— Bldg. & Impr. ....	25,000.00	24,015.90	984.10	984.10	.....
1-3-11-000-0503 Capital Outlay— Bldg. Construction ....	123,861.46	122,135.20	1,726.26	.....	1,726.26
1-3-11-000-0504 Capital Outlay— Livestock .....	400.00	355.00	45.00	45.00	.....
1-3-11-000-0508 Capital Outlay— Equipping Receiv- ing Wards .....	24,908.00	24,819.21	88.79	88.79	.....
1-3-11-000-1100 Insurance Recoveries	8,149.18	.....	8,149.18	8,149.18	.....
1-3-11-000-0509 Renovation, Bldg. & Equipment .....	2,179,564.73	.....	2,179,564.73	.....	2,179,564.73
Total Available for Expenditure .....	\$3,896,991.31	.....	.....	.....	.....
Total Expended 1951-52.....	.....	\$1,656,473.88	.....	.....	.....
Balance June 30, 1952 .....	.....	.....	\$2,240,517.43	.....	.....
Reverted to General Fund June 30, 1952.....	.....	.....	.....	\$50,394.58	.....
Balance Forward to 1952-53.....	.....	.....	.....	.....	\$2,190,122.85



## EXPENDITURE REPORT

July 1, 1951 to June 30, 1952

	Current Expendi- tures—Other 1-3-11-000-0200	Special Operating 1-3-11-000-0800	Both
211 Postage .....	\$ 1,081.16	\$.....	\$ 1,081.16
212 Telephone and Telegraph .....	3,780.73	630.34	4,411.07
215 Utilities .....	35,262.01	6,026.77	41,288.78
220 Travel - State .....		444.74	444.74
240 Professional Fees .....	1,647.06	369.00	2,016.06
260 Maintenance of Bldgs., Grounds & Equipment.....	15,676.84	131.14	15,807.98
270 Care of Institutional Wards .....	461.43	4,724.05	5,185.48
290 Other Contractual Serv's .....	7,857.25	658.05	8,515.30
321 Food .....	242,308.67	74,848.37	317,157.04
380 Other Supplies, Materials & Parts.....	241,131.72	15,466.38	256,598.10
417 Rent .....	589.19	19.50	608.69
430 Subscriptions .....		14.55	14.55
460 Discharge Money for Patients .....	82.60	.....	82.60
490 Fixed Charges .....	649.53	.....	649.53
TOTAL .....	\$550,528.19	\$103,332.89	\$653,861.08

### ADVANCED CURATIVE TREATMENT

1-3-11-000-1000

110 Salaries .....	\$20,754.60
270 Care of Institutional Wards.....	13,198.00
380 Other Supplies, Materials and Parts.....	863.04
600 Equipment .....	2,155.73
TOTAL .....	\$36,971.37

### SUBSCRIPTIONS AND ORGANIZATION DUES

1-3-11-000-0300

430 Subscriptions, Books and Dues.....	\$ 100.00
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### ENDOWMENT EARNINGS

2-3-11-000-0700

380 Other Supplies, Materials and Parts.....	\$ 224.94
600 Equipment .....	8,741.27
720 Building and Improvements.....	6,595.20
TOTAL .....	\$15,561.41



## TRAVEL—STATE

1-3-11-000-0401

220 Travel Within the State .....\$ 1,572.25

## TRAVEL—OUT OF STATE

1-3-11-000-0402

230 Travel—Out of State.....\$ 2,040.12

## CAPITAL OUTLAY—EQUIPMENT

1-3-11-000-0501

600 Equipment .....\$ 9,331.73

720 Building & Improvements ..... 665.00

Total .....\$ 9,996.73

## CAPITAL OUTLAY—BUILDING &amp; IMPROVEMENTS

1-3-11-000-0502

600 Equipment .....\$ 3,634.46

720 Building & Improvements..... 20,017.40

260 Maintenance of Bldgs., Grounds & Equipment..... 364.04

TOTAL .....\$24,015.90

## CAPITAL OUTLAY—BUILDING CONSTRUCTION

1-3-11-000-0503

600 Equipment .....\$ 240.59

720 Buildings & Improvements.....121,894.61

TOTAL .....\$122,135.20

## CAPITAL OUTLAY—LIVESTOCK

1-3-11-000-0504

740 Livestock .....\$ 355.00

## CAPITAL OUTLAY—EQUIPPING RECEIVING WARDS

1-3-11-000-0508

600 Equipment .....\$ 12,831.98

720 Building and Improvements ..... 11,987.23

TOTAL .....\$ 24,819.21



## CAPITAL OUTLAY—EQUIPMENT

1-3-11-000-0501

## OFFICE EQUIPMENT:

1 Filing Cabinet .....	\$ 102.00	
1 Royal Typewriter .....	140.25	
1 Mimeograph Machine .....	555.90	
1 Numbering Machine .....	21.42	
		\$ 819.57

HOUSEHOLD, KITCHEN AND  
SANITARY EQUIPMENT:

Ward Safety Equipment.....	76.48	
2 Garbage Disposal Units .....	573.24	
1 Scale .....	153.00	
1 Radio for Ward .....	16.78	
1 Cooling Tower .....	665.00	
2 Gas Griddles .....	371.89	
6 Roller Bins .....	249.21	
1 Sink .....	188.74	
2 Bakers' Tables .....	430.44	
2 Deep Fryers .....	555.12	
1 Water Heater and Sprayer.....	79.98	
1 Hollymatic Molding Machine for Meat.....	845.89	
1 Meat Tenderizer .....	255.00	
3 Stainless Steel Kettles .....	1,300.00	
		\$5,760.77

## FARM EQUIPMENT:

1 Power Loader for Tractor.....	386.58	
2 Garden Planters .....	78.74	
		\$ 465.32

## GARAGE AND MAINTENANCE EQUIPMENT:

1 Water Storage Tank and Installation.....	2,700.00	
1 Gear Threader .....	86.70	
1 Arco Gun .....	164.37	
		\$2,951.07

Total Expenditures, Capital Outlay—Equipment.....\$9,996.73



## ENDOWMENT EARNINGS

2-3-11-000-0700

1 Solenoid Valve for Revolving Gas Oven.....	\$ 16.13
Parts, Supplies and Supervision for Installation of Revolving Gas Oven (Bakery) .....	550.64
1 Western Semi-Automatic Closing Machine for Cannery....	629.33
4 Automatic Toasters.....	99.96
1 Revolving Recordex for Telephone Switchboard.....	99.96
1 Troemer Scales for Pharmacy.....	130.00
2 Ward Radios .....	37.59
1 Electrolux Cleaner .....	83.74
Carpet for Cottage X4 (including installation).....	256.17
1 Gas Range for Apartment No. 3.....	99.45
1 Film Filing Cabinet.....	114.63
1 Numbering Machine .....	31.21
1 Grey Office Table .....	93.02
1 Master Chair .....	107.71
2 Chairs .....	64.83
1 Letter File .....	139.23
1 Waste Basket .....	5.36
1 Telephone Stand .....	35.50
1 Cole Book Case.....	30.55
1 Crawler Tractor .....	2,295.00
2 Wheel Barrows .....	63.36
Hay Baling Equipment (1 carrier, 2 chisel shanks).....	245.23
2 Wright coolers with Motors, 2 Wright Motors.....	891.44
1 Heavy Duty Electric Saw.....	73.97
416 Individual Laying Cages .....	644.80
4 Fire Hydrants (including installation).....	1,684.71
2 All Steel Galvanized Garage Doors.....	130.29
Equipment for Fly Control.....	1,589.01
1 150' Cable Steel Safety Swing Scaffold.....	408.10
Materials for Construction of Garage.....	638.60
Materials for Construction of Five Double Carports.....	1,184.48
Paving of Ward C Patio .....	1,559.25
Improvement of Parking Area .....	1,498.16
Advertising for Bids for Installation of Linoleum for Receiving Wards.....	30.00
Total Expenditures, Endowment Earnings.....	\$15,561.41



## BUDGET FOR THE YEAR 1952-53

	Appropriation	Carried Forward from 1951-52
Personal Services.....	\$ 939,904.00	\$ .....
Current Expenditures—		
Other .....	750,300.00	.....
Travel—State .....	2,000.00	.....
Travel—Out of State .....	5,000.00	.....
Subscriptions & Organization Dues .....	150.00	.....
Fixed Charges—Other .....	935.00	.....
Capital Outlay—		
Equipment .....	30,000.00	.....
Capital Outlay—Building & Improvements .....	39,500.00	.....
Capital Outlay—Livestock .....	400.00	.....
Capital Outlay—Renovation, Buildings & Equipment..	2,179,564.73	.....
Capital Outlay—Building Construction .....		1,726.26
Advanced Curative Treatment .....		41.26
Endowment Earnings .....		8,790.60
Special Operating .....		.....
	<u>\$3,947,753.73</u>	<u>10,558.12</u>
		<u>\$3,947,753.73</u>
		\$3,958,311.85
Estimated Collections:		
Maintenance .....	100,000.00	
Endowment Earnings ....	15,000.00	
	<u>115,000.00</u>	
Total Budget for Year 1952-53.....		<u>\$4,073,311.85</u>



NON-RESIDENT PATIENTS DEPORTED AT STATE EXPENSE  
July 1, 1951 to June 30, 1952

Alabama .....	1
Arkansas .....	2
California .....	12
Colorado .....	3
Connecticut .....	1
Illinois .....	2
Indiana .....	1
Kansas .....	2
Maryland .....	1
Michigan .....	2
Mississippi .....	1
Missouri .....	3
Montana .....	1
New Jersey .....	2
New Mexico .....	1
New York .....	1
Ohio .....	1
Oklahoma .....	2
Oregon .....	4
Texas .....	1
Virginia .....	1
	—
Total .....	45

FOR COMPARISON, COLLECTIONS FROM PATIENTS  
BY YEARS ARE AS FOLLOWS:

1940-41 .....	\$ 12,104.15
1941-42 .....	17,710.17
1942-43 .....	20,252.01
1943-44 .....	35,518.64
1944-45 .....	36,487.62
1945-46 .....	48,342.15
1946-47 .....	67,754.07
1947-48 .....	74,809.25
1948-49 .....	85,826.86
1949-50 .....	93,612.11
1950-51 .....	108,303.07
1951-52 .....	110,743.30



FARM LIVESTOCK REPORT  
July 1, 1951 to June 30, 1952

## COWS:

On Hand June 30, 1951.....	120		
Increase from Heifers .....	8		
	<u>          </u>	128	
Butchered .....	19		
Died .....	7		
	<u>          </u>	26	
On Hand June 30, 1952 .....		<u>          </u>	102

## HEIFERS &amp; CALVES:

On Hand June 30, 1951 .....	98		
Born .....	81		
	<u>          </u>	179	
Grown and Matured to Cows .....	8		
Butchered .....	49		
Died .....	16		
	<u>          </u>	73	
On Hand June 30, 1952 .....		<u>          </u>	106

## BULLS:

On Hand June 30, 1951 .....	4		
On Hand June 30, 1952 .....	<u>          </u>		4

## HOGS:

On Hand June 30, 1951 .....	199		
Born .....	476		
	<u>          </u>	675	
Butchered .....	255		
Died .....	28		
	<u>          </u>	283	
On Hand June 30, 1952.....		<u>          </u>	392

## RABBITS:

On Hand June 30, 1951 .....	109		
Born .....	366		
	<u>          </u>	475	
Butchered .....	325		
Died .....	69		
	<u>          </u>	394	
On Hand June 30, 1952 .....		<u>          </u>	81



## CHICKENS:

On Hand June 30, 1951 .....	2,304		
Purchased .....	3,600		
	—	5,904	
Butchered .....	3,000		
Died .....	607		
	—	3,607	
On Hand June 30, 1952 .....		—	2,297

## TURKEYS:

On Hand June 30, 1951 .....	990		
Born .....	1,003		
	—	1,993	
Butchered .....	991		
Died .....	560		
	—	1,551	
On Hand June 30, 1952.....		—	442

## MULE:

On Hand June 30, 1951 and June 30, 1952	1
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## FARM PRODUCE REPORT

July 1, 1951 to June 30, 1952

	Weight	Unit	Price	Total
VEGETABLES:				
Beets .....	92,180	Lbs.	.03	\$ 2,765.40
Broccoli .....	2,820	"	.08	225.60
Cabbage .....	83,900	"	.02½	2,097.50
Cantaloupes ..	26,967	"	.02	539.34
Carrots .....	71,780	"	.03	2,153.40
Cauliflower ..	5,950	"	.05	297.50
Chard .....	23,660	"	.03	709.80
Cucumbers ....	27,525	"	.04	1,101.00
Egg Plant ....	6,165	"	.04	246.60
Endive .....	2,840	"	.07	198.80
Greens .....	15,400	"	.02½	385.00
Lettuce .....	53,040	"	.05	2,652.00
Okra .....	4,235	"	.04	211.75
Onions,				
Green .....	27,940	"	.08	2,235.20
Onions, Dry..	94,260	"	.04	3,770.40
Parsnips .....	13,700	"	.04	548.00
Peppers, Bell				
& Chili.....	14,480	"	.08	1,158.40
Rutabagas ....	42,700	"	.02½	1,067.50
Spinach .....	49,320	"	.08	3,945.60
Squash .....	12,055	"	.03	361.65
Tomatoes .....	313,190	"	.04	12,527.60
Turnips .....	18,400	"	.02½	460.00
Total .....1,002,507 Lbs.				\$ 39,658.04
Pecans .....	400	"	.35	140.00
MEAT:				
Beef .....	34,099	"	.50	17,049.50
Pork .....	70,920	"	.35	24,822.00
Total ..... 105,019 Lbs.				41,871.50



## POULTRY:

Fryers....	5,613 Lbs.	.45	2,525.85	
Hens .....	8,094 "	.40	3,237.60	
Turkeys .....	21,926 "	.45	9,866.70	
Total .....	35,633 Lbs.		15,630.15	
EGGS .....	15,902 Doz.	.50	7,951.00	
				23,581.15
RABBITS .....	900 Lbs.	.45		405.00
MILK to Kitchen..	115,593 Gal.	.60		69,355.80
TOTAL VALUE OF FARM PRODUCTS.....				\$175,011.49
OPERATING COSTS:				
Salaries .....	\$ 25,771.00			
Opr. Expenses..	81,740.01			
				\$107,511.01
BALANCE .....				\$ 67,500.48

INVENTORY OF SUPPLIES IN STORE ROOM  
June 30, 1952

Food .....	\$25,829.22
Supplies .....	52,302.05
TOTAL .....	\$78,131.27
Cost of Maintaining Patient Per Day .....	\$2.51
(Includes Total Expenditures Less Capital Investment and Capital Outlay from other funds.)	
Average Number of Patients .....	1,589

CANNING REPORT  
July 1, 1951 to June 30, 1952

Apple Sauce .....	1,904 No. 10 Cans
Beets .....	895 "
Bread & Butter Pickles .....	449 "
Carrots .....	3,543 "
Cucumber Relish .....	289 "
Kraut .....	856 "
Pepper Relish .....	1,269 "
Spinach .....	1,495 "
Tomatoes .....	3,945 "
Tomato Relish .....	506 "



SURPLUS FOODS RECEIVED FROM THE  
UNITED STATES GOVERNMENT  
July 1, 1951 to June 30, 1952

Apples .....	175	Boxes
Apple Sauce .....	215	Cases
Dried Eggs .....	1	Barrel
Dried Milk .....	2	Barrel
Honey .....	246	Cases
Orange Juice .....	449	Cases

ANALYSIS OF FOOD USED IN KITCHEN  
July 1, 1951 to June 30, 1952

Beef Purchased .....	132,301	Lbs.
Beef Produced by Hospital .....	34,099	"
Pork Purchased .....	41,418	"
Pork Produced by Hospital .....	70,920	"
Chickens Produced by Hospital .....	13,707	"
Turkeys Produced by Hospital .....	21,926	"
Lamb Purchased .....	1,084	"
Bacon Purchased .....	1,021	"
Ham Purchased .....	12,794	"
Lunch Meat Purchased .....	16,642	"
Weiners Purchased .....	11,096	"
Compound Purchased .....	1,100	"
Oleomargarine Purchased .....	36,332	"
Eggs Produced by Hospital .....	15,902	Doz.
Flour .....	33,500	Lbs.
Corn Meal .....	7,500	"
Oat Meal .....	7,027	"
Cracked Wheat .....	7,100	"
Macaroni .....	9,419	"
Noodles .....	5,885	"
Spaghetti .....	4,746	"
Dry Beans .....	23,700	"
Rice .....	9,500	"
String Beans .....	7,305	No. 10 Cans
Tomatoes .....	892	No. 10 Cans
Peas .....	7,321	No. 10 Cans
Dried Fruits .....	24,092	Lbs.
Fish .....	15,970	"
Potatoes .....	236,400	"
Sugar .....	69,224	"
Tea .....	1,887	"
Coffee .....	22,484	"
Fresh Fruits .....	\$	4,075.17
Fresh Produce .....		9,557.76
Frozen Foods .....		897.80



## SEWING ROOM REPORT

July 1, 1951 to June 30, 1952

Aprons .....	784	Napkins .....	100
Aprons (Rubber) .....	53	Panties .....	1,325
Admission Sacks .....	14	Pillow Slips .....	1,821
Bed Pan Covers .....	120	Pillow (Rubber) .....	12
Bed Pads .....	13	Pillow Ticks .....	55
Blouses .....	11	Pastry Cloths .....	2
Camisoles .....	27	Restraint Bands .....	227
Coffee Bags .....	48	Retention Belts .....	66
Curtains .....	48 pr.	Sanitary Pads .....	807
Dresses (Better) .....	675	Sheets .....	2,188
Dresses (Heavy) .....	1,139	Sheets (Rubber) .....	445
Draperies .....	18 pr.	Slips .....	1,648
Diapers .....	80	Table Cloths .....	36
Drop Cloths .....	13	Table Pad .....	1
Gowns (Baby) .....	63	Towels (Tea) .....	1,615
Gowns .....	1,423	Towels (Hand) .....	1,924
Gowns (Tie Back) .....	628	Towels (Bath) .....	2,964
Gowns (Surgery) .....	96	Turkey Saddles .....	15
Laundry &		Uniforms .....	598
Hamper Bags .....	14	Wash Cloths .....	117
Mattress Ticks			
(Rubber) .....	10		
Mattress Ticks .....	302	Garments Mended .....	11,674
Masks .....	30	Sheets Mended .....	771

## BEAUTY SHOP REPORT

July 1, 1951 to June 30, 1952

Shampoos .....	5,732
Permanents .....	164
Finger Waves .....	5,247
Manicures .....	2,403
Facials .....	23
Rinses .....	5,677
Braids .....	775
Hair Cuts .....	549
Oil Treatments .....	355
Brow Arches .....	54
Hair Dressings .....	5,714







